

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number
[Redacted]

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	32	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	32 minus 20 =	12
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A		(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	72	Minus	32	-
Independent	4	Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

SMALL ENTITY TYPE	<input type="checkbox"/>	OTHER THAN SMALL ENTITY	<input type="checkbox"/>
RATE	355.00	OR RATE	710.00
X\$ 9=		OR X\$18=	245
X40=		OR X80=	80
+135=		OR +270=	-
TOTAL		OR TOTAL	1054

SMALL ENTITY	<input type="checkbox"/>	OTHER THAN SMALL ENTITY	<input type="checkbox"/>
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	/
X40=		OR X80=	/
+135=		OR +270=	/
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	/

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	33	Minus	32	1
Independent	4	Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	33	Minus	32	1
Independent	4	Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	23	Minus	33	-
Independent	3	Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	23	Minus	33	-
Independent	3	Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 2.
- * If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20."
- * If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.